

S. Huff 09/767, 424

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	IBM Technical Disclosure Bulletins	▼

  

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<b>Display:</b>	25	<b>Documents in Display Format:</b>	REV, K	<b>Starting with Number</b>	1
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Search

Clear

Help

Logout

Interrupt

Main Menu

Show S Numbers

Edit S Numbers

Preferences

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### Search History

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Today's Date: 1/18/2002

<u>DB Name</u>	<u>Query</u>	<u>Hit Count</u>	<u>Set Name</u>
USPT,PGPB	temozolomide or temodal or methazolastone	82	<u>L1</u>
USPT,PGPB	ccrg 81045 or "M and B 39831" or MB 39831 or nsc 362856 or sch 52365	6	<u>L2</u>
USPT,PGPB	11 or 12	82	<u>L3</u>
USPT,PGPB	interferon near1 alpha	2939	<u>L4</u>
USPT,PGPB	pegylat\$ or poly ethylene glycol or polythylene glycol or polyethyleneglycol	12369	<u>L5</u>
USPT,PGPB	polygol or macrogol or carbowax	6978	<u>L6</u>
USPT,PGPB	14 with (15 or 16)	13	<u>L7</u>
USPT,PGPB	peginterferon or pegintron or sch 54031	1	<u>L8</u>
USPT,PGPB	17 or 18	13	<u>L9</u>
USPT,PGPB	13 and 19	0	<u>L10</u>
USPT,PGPB	chemotherap? or antitumor or antineoplastic or anaplastic	23044	<u>L11</u>
USPT,PGPB	19 and 111	8	<u>L12</u>
USPT,PGPB	19 same 111	2	<u>L13</u>
USPT,PGPB	cancer or tumor or neoplasm or carcinoma	66130	<u>L14</u>
USPT,PGPB	19 and 114	9	<u>L15</u>
USPT,PGPB	19 same 114	1	<u>L16</u>
USPT,PGPB	(Zaknoen)[IN] AND (Sara)[IN]	0	<u>L17</u>

**WEST****Generate Collection****Search Results - Record(s) 1 through 1 of 1 returned.**

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☐ 1. Document ID: US 20010053548 A1

L16: Entry 1 of 1

File: PGPB

Dec 20, 2001

PGPUB-DOCUMENT-NUMBER: 20010053548

PGPUB-FILING-TYPE: new

DOCUMENT-IDENTIFIER: US 20010053548 A1

TITLE: Renal cell carcinoma treatment

PUBLICATION-DATE: December 20, 2001

## INVENTOR-INFORMATION:

NAME	CITY	STATE	COUNTRY	RULE-47
Rybak, Mary Ellen	Waren	NJ	US	
Rose, Esther Helen	Westfield	NJ	US	

US-CL-CURRENT: 435/387; 424/85.2

## ABSTRACT:

Methods for treating treatment-naive as well as treatment-experienced patients having RCC to achieve at least a partial tumor response involving administering a therapeutically effective amount of pegylated interferon-alpha, e.g., pegylated interferon alpha-2b as monotherapy or in association with a therapeutically effective amount of IL-2 are disclosed.

L16: Entry 1 of 1

File: PGPB

Dec 20, 2001

DOCUMENT-IDENTIFIER: US 20010053548 A1  
TITLE: Renal cell carcinoma treatment

ABTX:

Methods for treating treatment-naive as well as treatment-experienced patients having RCC to achieve at least a partial tumor response involving administering a therapeutically effective amount of pegylated interferon-alpha, e.g., pegylated interferon alpha-2b as monotherapy or in association with a therapeutically effective amount of IL-2 are disclosed.

BSTX:

[0003] This invention relates to an improved therapy for treating patients having renal cell carcinoma ("RCC") by administering a therapeutically effective dose of pegylated interferon-alpha for a time sufficient to achieve at least a partial tumor response.

BSTX:

[0005] The present invention provides a method of treating a patient having renal cell carcinoma which comprises administering to such a patient a therapeutically effective dose of pegylated interferon alpha for a time period sufficient to effect at least a partial tumor response.

BSTX:

[0006] The present invention also provides a method of treating a patient having metastatic renal cell carcinoma which comprises administering to said patient an effective amount of pegylated interferon-alpha once a week for a time period sufficient to effect at least a partial tumor response.

BSTX:

[0007] The present invention further provides a method of treating a patient having metastatic renal cell carcinoma which comprises administering to such a patient about 4.5 micrograms/kg to about 9.0 micrograms/kg of pegylated interferon alpha-2b once a week for a time period sufficient to effect at least a partial tumor response.

CLTX:

1. A method of treating a patient having renal cell carcinoma which comprises administering to such a patient a therapeutically effective dose of pegylated interferon alpha for a time period sufficient to effect at least a partial tumor response.

CLTX:

9. A method of treating a patient having metastatic renal cell carcinoma which comprises administering to said patient an effective amount of pegylated interferon-alpha once a week for a time period sufficient to effect at least a partial tumor response.

CLTX:

15. A method of treating a patient having metastatic renal cell carcinoma which comprises administering to such a patient about 4.5 micro-grams/kg to about 9.0 micrograms/kg of pegylated interferon alpha-2b once a week for a time period sufficient to effect at least a partial tumor response.

Full	Title	Citation	Front	Review	Classification	Date	Reference	Claims	KWIC	Draw Desc	Image
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Term	Documents
(9 SAME 14).USPT,PGPB.	1

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**Today's Date:** 1/18/2002

<u>DB Name</u>	<u>Query</u>	<u>Hit Count</u>	<u>Set Name</u>
JPAB,EPAB,DWPI	temozolomide or temodal or methazolastone	25	<u>L1</u>
JPAB,EPAB,DWPI	ccrg 81045 or "M and B 39831" or MB 39831 or nsc 362856 or sch 52365	0	<u>L2</u>
JPAB,EPAB,DWPI	interferon	5729	<u>L3</u>
JPAB,EPAB,DWPI	pegylat\$ or poly ethylene glycol or polythylene glycol or polyethyleneglycol	3196	<u>L4</u>
JPAB,EPAB,DWPI	polygol or macrogol or carbowax	314	<u>L5</u>
JPAB,EPAB,DWPI	peginterferon or pegintron or sch 54031	0	<u>L6</u>
JPAB,EPAB,DWPI	13 with (14 or 15)	13	<u>L7</u>
JPAB,EPAB,DWPI	11 and 17	1	<u>L8</u>
JPAB,EPAB,DWPI	chemotherap? or antitumor or antineoplastic or anaplastic	20227	<u>L9</u>
JPAB,EPAB,DWPI	17 and 19	0	<u>L10</u>
JPAB,EPAB,DWPI	cancer or tumor or neoplasm or carcinoma	75094	<u>L11</u>
JPAB,EPAB,DWPI	17 and 111	3	<u>L12</u>
JPAB,EPAB,DWPI	112 not 18	2	<u>L13</u>
JPAB,EPAB,DWPI	(Zaknoen)[IN] AND (S\$)[IN]	1	<u>L14</u>
JPAB,EPAB,DWPI	114 not 18	0	<u>L15</u>

**WEST****Generate Collection****Search Results - Record(s) 1 through 1 of 1 returned.**☐ 1. Document ID: WO 200152882 A1, AU 200132951 A

L8: Entry 1 of 1

File: DWPI

Jul 26, 2001

DERWENT-ACC-NO: 2001-549888

DERWENT-WEEK: 200161

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TITLE: Use of temozolomide and pegylated interferon alpha for treating a patient afflicted with cancer

INVENTOR: ZAKNOEN, S L

PRIORITY-DATA: 2000US-177624P (January 24, 2000)

## PATENT-FAMILY:

PUB-NO	PUB-DATE	LANGUAGE	PAGES	MAIN-IPC
WO 200152882 A1	July 26, 2001	E	032	A61K038/21
AU 200132951 A	July 31, 2001		000	A61K038/21

INT-CL (IPC): A61K 31/53; A61K 38/21; A61P 35/00; A61K 38/21; A61K 31/53

ABSTRACTED-PUB-NO: WO 200152882A

## BASIC-ABSTRACT:

NOVELTY - Treatment of a human patient afflicted with cancer involves administering therapeutic amounts of temozolomide and pegylated interferon alpha to the patient.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is included for a medical kit comprising temozolomide, pegylated interferon alpha and printed instructions for administering temozolomide and pegylated interferon alpha to the cancer patient.

ACTIVITY - Cytostatic. Temozolomide in tablet form, was administered to a patient suffering from advanced melanoma for a period of six 28 day cycles, each cycle consisted of a three week period in which temozolomide was administered at a rate of 100 mg/m<sup>2</sup>/day, followed by a one week rest period in which temozolomide was not administered. Polyethylene glycol (12000 molecular weight)-interferon alpha -2b was administered subcutaneously at a dose of 6 micro g/kg starting on day 1 of the temozolomide treatment and continued once weekly throughout the six 28 day cycles. No results are provided.

MECHANISM OF ACTION - None given.

USE - For treating patients afflicted with cancer (claimed) such as melanoma, high grade glioma, glioblastoma and other brain cancers, breast cancer, testicular cancer, gastrointestinal cancer including colon, rectal, pancreatic and gastric cancer, hepatocellular carcinoma, head and neck cancer, renal cell carcinoma, adenocarcinoma, sarcoma, lymphoma, leukemia and mycosis fungoide.

ADVANTAGE - The method provides higher response rate against the presence of cancerous tumors, fatigue, pain, decreased performance status from tumor burden and other symptoms associated with other specific cancers and reduced side



EFFECTS.

Full	Title	Citation	Front	Review	Classification	Date	Reference	Claims	KWIC	Draw Desc	Image
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Term	Documents
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**Search Results - Record(s) 1 through 2 of 2 returned.**

☐ 1. Document ID: JP 2001288110 A, EP 1043025 A2, CA 2303752 A1, WO 200061174 A2, JP 2000319196 A, AU 200042044 A

L13: Entry 1 of 2

File: DWPI

Oct 16, 2001

DERWENT-ACC-NO: 2000-620273

DERWENT-WEEK: 200176

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TITLE: Use of pegylated interferon-alpha, optionally in combination with fluorouracil and/or interleukin-2, for treating renal cell carcinoma

INVENTOR: ROSE, E H; RYBAK, M E

PRIORITY-DATA: 1999US-0288359 (April 8, 1999), 2000JP-0105531 (April 6, 2000)

## PATENT-FAMILY:

PUB-NO	PUB-DATE	LANGUAGE	PAGES	MAIN-IPC
JP 2001288110 A	October 16, 2001		009	A61K038/21
EP 1043025 A2	October 11, 2000	E	009	A61K038/21
CA 2303752 A1	October 8, 2000	E	000	A61K038/21
WO 200061174 A2	October 19, 2000	E	000	A61K038/21
JP 2000319196 A	November 21, 2000		008	A61K038/21
AU 200042044 A	November 14, 2000		000	A61K038/21

INT-CL (IPC): A61K 31/505; A61K 31/513; A61K 38/00; A61K 38/21; A61K 47/48; A61P 13/12; A61P 35/00

ABSTRACTED-PUB-NO: EP 1043025A

## BASIC-ABSTRACT:

NOVELTY - Pegylated interferon- alpha is used in the manufacture of medicaments for heating a patient having renal cell carcinoma.

DETAILED DESCRIPTION - Pegylated interferon- alpha (pIFN- alpha ) is used in the manufacture of medicaments for heating a patient having renal cell carcinoma.

An INDEPENDENT CLAIM is also included for a kit comprising pIFN alpha and instructions for its use for heating a patient having renal cell carcinoma.

ACTIVITY - Cytostatic.

Subjects which had been diagnosed as having metastatic renal cell carcinoma, where treated with 6.0 mu g/kg of pIFN alpha -2b once a week. No results are given.

MECHANISM OF ACTION - Antimetastatic.

USE - The method is used for the treatment of renal cell carcinoma. The method effects an at least partial, preferably complete tumor response (claimed).

ADVANTAGE - The treatment is safer and more efficacious and tolerable than prior

art. The treatment can be used on patients which are newly diagnosed, or which are intolerant or resistant to interferon- alpha .

Full	Title	Citation	Front	Review	Classification	Date	Reference
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KMIC	Draw Desc	Image
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2. Document ID: JP 2001508783 W, WO 9832466 A1, AU 9857737 A, EP 921817 A1, EP 921817 B1, DE 69800640 E

L13: Entry 2 of 2

File: DWPI

Jul 3, 2001

DERWENT-ACC-NO: 1998-427686

DERWENT-WEEK: 200142

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TITLE: Process for attachment of poly:ethylene glycol to target substrates - by reacting halogenated PEG with substrate e.g. peptide, nucleic acid, non-steroidal hormone, antibiotic or liposome

INVENTOR: FISHER, D; FRANCIS, G E ; MALIK, F

PRIORITY-DATA: 1997GB-0008055 (April 22, 1997), 1997GB-0001800 (January 29, 1997), 1997GB-0001804 (January 29, 1997), 1997GB-0004653 (March 6, 1997)

PATENT-FAMILY:

PUB-NO	PUB-DATE	LANGUAGE	PAGES	MAIN-IPC
JP 2001508783 W	July 3, 2001		055	A61K047/48
WO 9832466 A1	July 30, 1998	E	064	A61K047/48
AU 9857737 A	August 18, 1998		000	A61K047/48
EP 921817 A1	June 16, 1999	E	000	A61K047/48
EP 921817 B1	March 28, 2001	E	000	A61K047/48
DE 69800640 E	May 3, 2001		000	A61K047/48

INT-CL (IPC): A61K 38/00; A61K 38/22; A61K 38/46; A61K 47/48

ABSTRACTED-PUB-NO: EP 921817B

BASIC-ABSTRACT:

Process for polyethylene glycol attachment i.e. (PEG)ylation of substrates comprises reacting halogenated PEG with substrate to bind the PEG directly to the substrate provided that the substrate is not a steroid or that, when the halogenated PEG is PEG-bromide, the substrate is not 5-fluorouracil.

Also claimed is a reagent comprising monomethoxy PEG (MPEG)-halide obtained by the reaction of MPEG with tresylhalide such that at least part of the tresyl MPEG (TMPEG) produced in the reaction is removed.

USE - The method is used to PEGylate materials with biological activity useful in diagnosis or therapy. PEGylation may be used to increase the half-life of a substrate such as a liposome. The method is used to PEGylate proteins, peptides, amino acids and their derivatives such as antibodies and fragments, cytokines and derivatives or fragments, interleukins (IL), colony-stimulating factors (CSF) (granulocyte-macrophage CSF, granulocyte CSF ( alpha and beta , macrophage CSF), haemopoietins (erythropoietin, haemopoietin- alpha and kit-ligand), interferons (IFN) (IFN- alpha , IFN- beta , IFN- gamma ), growth factors and bifunctional growth modulators (epidermal growth factor, platelet-derived growth factor, transforming growth factor ( alpha and beta ), amphiregulin, somatomedin-C, bone growth factor, fibroblast growth factors, insulin-like growth factors, heparin-binding growth factors and tumour growth factors, differentiation factors (macrophage differentiating factor, differentiation-inducing factor and leukaemia

inhibitory factor), activating factors (platelet-activating factor, macrophage-activation factor), coagulation factors (fibrinolytic/anticoagulant agents e.g. heparin and proteases and their pro-factors, i.e. clotting factors, VII, VIII, IX, X, XI and XII, antithrombin III, protein C, protein S, streptokinase, urokinase, prourokinase, tissue plasminogen activator, fibrinogen and hirudin), peptide hormones (insulin, growth hormone, gonadotrophins, follicle-stimulating hormone, leutenising hormone, growth hormone-releasing hormone, calcitonin), enzymes (superoxide dismutase, glucocerebrosidase, asparaginase, adenosine deaminase), vaccines (hepatitis-B, malaria, melanoma and HIV-1 vaccines), transcription factors and transcriptional modulators, carbohydrates, glycosoaminoglycans, glycoproteins and polysaccharides, lipids (phosphatidylethanolamine, phosphatidylserine and derivatives, sphingosine and derivatives, nucleotides, nucleosides, heterocyclic bases, DNA, RNA, synthetic and non-synthetic oligonucleotides including those with nuclease-resistant backbones, vitamins, antibiotics including lantibiotics, bacteriostatic and bactericidal agents, antifungal, anthelmintic and other agents effective against infective agents including unicellular pathogens, small effector molecules (noradrenaline, alpha adrenergic receptor ligands, dopamine receptor ligands, histamine receptor ligands, GABA/benzodiazepine receptor ligands, serotonin receptor ligands, leukotrienes and triiodothyronine), and cytotoxic agents such as doxorubicin and methotrexate and their derivatives. The substrate may be part of a larger multi-molecular structures including erythrocytes, leukocytes, viruses, unicellular organisms, liposomes such as multilamellar vesicles and unilamellar vesicles, micelles and micelle-like structures, aggregates, microemulsions, coacervates, emulsions and suspensions and on the surface of devices such as catheters, stents, contact lenses or artificial valves.

ADVANTAGE - The products do not lose their bioactivity relative to the unPEGylated substrate, such that PEGylation maintains or increases the specific activity of the substrate or the in vivo half-life of a substrate that has its specific activity decreased, maintained or increased by PEGylation. PEGylation may modify differentially the specific activity of pleiotropic substrates such as certain proteins. The method can be used to attach PEG moieties of any size to target substrates.

ABSTRACTED-PUB-NO:

WO 9832466A EQUIVALENT-ABSTRACTS:

Process for polyethylene glycol attachment i.e. (PEG)ylation of substrates comprises reacting halogenated PEG with substrate to bind the PEG directly to the substrate provided that the substrate is not a steroid or that, when the halogenated PEG is PEG-bromide, the substrate is not 5-fluorouracil.

Also claimed is a reagent comprising monomethoxy PEG (MPEG)-halide obtained by the reaction of MPEG with tresylhalide such that at least part of the tresyl MPEG (TMPEG) produced in the reaction is removed.

USE - The method is used to PEGylate materials with biological activity useful in diagnosis or therapy. PEGylation may be used to increase the half-life of a substrate such as a liposome. The method is used to PEGylate proteins, peptides, amino acids and their derivatives such as antibodies and fragments, cytokines and derivatives or fragments, interleukins (IL), colony-stimulating factors (CSF) (granulocyte-macrophage CSF, granulocyte CSF (alpha and beta, macrophage CSF), haemopoietins (erythropoietin, haemopoietin- alpha and kit-ligand), interferons (IFN) (IFN- alpha, IFN- beta, IFN- gamma), growth factors and bifunctional growth modulators (epidermal growth factor, platelet-derived growth factor, transforming growth factor (alpha and beta), amphiregulin, somatomedin-C, bone growth factor, fibroblast growth factors, insulin-like growth factors, heparin-binding growth factors and tumour growth factors, differentiation factors (macrophage differentiating factor, differentiation-inducing factor and leukaemia inhibitory factor), activating factors (platelet-activating factor, macrophage-activation factor), coagulation factors (fibrinolytic/anticoagulant agents e.g. heparin and proteases and their pro-factors, i.e. clotting factors, VII, VIII, IX, X, XI and XII, antithrombin III, protein C, protein S, streptokinase, urokinase, prourokinase, tissue plasminogen activator, fibrinogen

and hirudin), peptide hormones (insulin, growth hormone, gonadotrophins, follicle-stimulating hormone, leutenising hormone, growth hormone-releasing hormone, calcitonin), enzymes (superoxide dismutase, glucocerebrosidase, asparaginase, adenosine deaminase), vaccines (hepatitis-B, malaria, melanoma and HIV-1 vaccines), transcription factors and transcriptional modulators, carbohydrates, glycosoaminoglycans, glycoproteins and polysaccharides, lipids (phosphatidylethanolamine, phosphatidylserine and derivatives, sphingosine and derivatives, nucleotides, nucleosides, heterocyclic bases, DNA, RNA, synthetic and non-synthetic oligonucleotides including those with nuclease-resistant backbones, vitamins, antibiotics including lantibiotics, bacteriostatic and bactericidal agents, antifungal, anthelmintic and other agents effective against infective agents including unicellular pathogens, small effector molecules (noradrenaline, alpha adrenergic receptor ligands, dopamine receptor ligands, histamine receptor ligands, GABA/benzodiazepine receptor ligands, serotonin receptor ligands, leukotrienes and triodothyronine), and cytotoxic agents such as doxorubicin and methotrexate and their derivatives. The substrate may be part of a larger multi-molecular structures including erythrocytes, leukocytes, viruses, unicellular organisms, liposomes such as multilamellar vesicles and unilamellar vesicles, micelles and micelle-like structures, aggregates, microemulsions, coacervates, emulsions and suspensions and on the surface of devices such as catheters, stents, contact lenses or artificial valves.

**ADVANTAGE** - The products do not lose their bioactivity relative to the unPEGylated substrate, such that PEGylation maintains or increases the specific activity of the substrate or the in vivo half-life of a substrate that has its specific activity decreased, maintained or increased by PEGylation. PEGylation may modify differentially the specific activity of pleiotropic substrates such as certain proteins. The method can be used to attach PEG moieties of any size to target substrates.

Full	Title	Citation	Front	Review	Classification	Date	Reference
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Term	Documents
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